



APPENDIX F

Forms

Predesign Capital Project Request Report Summary (previously Form C-2)

Agency/Institution Project Cost Estimate (updated for 2007-09), Form C-100

Benefit and Life Cycle Cost Analysis Summary, Form C-3

PREDESIGN CAPITAL PROJECT REQUEST REPORT SUMMARY

(Rev. 6/01)

AGENCY NAME					AGENCY CODE	
PROJECT TITLE				TYPE	PROJECT NUMBER	
PLAN PRIORITY	OFM PRIORITY	PREVIOUSLY	COUNTY	CITY	LEGISLATIVE DIST.	
WAS PROJECT INCLUDED IN PRIOR 10 YEARS? S?PLAN? (9)			IF YES, WHEN?		PREV. PROJECT #	

PROJECT DESCRIPTION		Project Mgmt by GA?	
a. Problem/Justification/Why is this project needed?			
b. Proposed Solution/Benefit to public service, strategic goals?		Complies w/GMA?	
c. Predesign Issues			
RELATED COSTS Operating budget costs/savings required for this project including staff and cost of maintenance		FTE; / \$ per fiscal year	

PROJECT STATISTICS									
PROJECT LIFE	Net Project Size (sq. ft.)			Gross Project Size (sq. ft.)			Cost Per Gross Square Foot		
	New	Remodel		New	Remode		New	Remodel	
Building Type:				PROJECT SCHEDULE (20)			ADJUSTED CAPITAL COST		
Project Phases	BASE COST (7/02)			START			COMPLETE		
ACQUISITION COSTS									
DESIGN CONSULTANT SERVICES									
CONSTRUCTION CONTRACT COSTS:									
MACC									
___% Contingency									
___% TAX									
CONSTRUCTION SUBTOTAL									
EQUIPMENT (include tax)									
ARTWORK									
OTHER COSTS									
CONTRACT ADMINISTRATION									
TOTAL COST									

ANALYSIS DATE:								ABBREVIATIONS	
PREPARED BY:								Assignable Sq Feet (ASF)	
PHONE NUMBER:								Full-Time Equivalent Student (FTE)	
								Weekly Student Hours (WSH) = student hours per week in room	
								Room Utilization Rate (RUR) = hours per week room is scheduled for use	
								Number of Stations (N) = desks or lab stations	
								Station Occupancy Ratio (SOR) = percent of stations used during scheduled use	
A.	ROOM TYPES	ASF	N	FTE	WSH	RUR	SOR		
	Classroom								
	Dry Lab								
	Wet Lab								
	Computer Lab								
	Faculty Office		n/a	n/a	n/a		n/a		
	Student Assembly		n/a	n/a	n/a		n/a		
	Non-Assignable Rooms		n/a	n/a	n/a	n/a	n/a		
B.	OPERATING AND MAINTENANCE COSTS							\$/YEAR	
	Utilities								
	Custodial								
	Maintenance								
	Security								
	Landscaping and Ground Maintenance								
	Liability and Hazard Insurance								
	Tenant Improvements								
	Capital Maintenance								
	Management Fees								
	Furniture								
	Moving Expenses								
	Telephone								
	Data Processing								
	Other Equipment								
	Total O&M Cost							\$0	

OPERATING IMPACT							
	Est. Total	2001-03	2003-05	2005-07	2007-09	2009-11	20011-13
Annual Average FTEs (#)	\$						
General Fund-State	\$						
Total Funds	\$						

PROJECT FUNDING							
FUND CODE(S)		ESTIMATED TOTAL COST		TOTAL EXPENDITURES		2003-05 FISCAL PERIOD	
				Prior Biennium	Current Biennium	Reappropriation	New Appropriation
				\$	\$	\$	\$
				FUTURE FISCAL PERIODS			
				2005-07	2007-09	2009-11	2011-13
				\$	\$	\$	\$

AGENCY:

PROJECT NAME:

PROJECT NUMBER:

LOCATION:

Enter an Agency Name on the Project Summary sheet OR in this cell.
Enter a Project Name on the Project Summary sheet OR in this cell.
Enter a Project Number on the Project Summary sheet OR in this cell.

Analysis Date:

Analysis By:

Contact Phone #:

WARNING: Design & Construction dates are used to escalate costs. Some sections will have ZERO escalated costs when dates are missing! A Design Date is Missing! A Construction Date is Missing!

STATISTICS:	Primary	Secondary
Gross Square Feet		
Net Square Feet		
Efficiency	0%	0%
Estimated Cost per S.F.	0	0
Building Type:		
Is project a remodel?	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
A/E Fee Class		
A/E Fee Percentage:	0.00%	0.00%

Contingency Rate:	
Management Reserve:	
Tax Rate:	
Art Requirement Applies:	<input type="checkbox"/> Yes
Project Admin by GA:	<input type="checkbox"/> Yes
Higher Ed. Institution:	<input type="checkbox"/> Yes
Alternative Public Works Project:	<input type="checkbox"/> Yes

Project Schedule	Start Date	End Date
1. Pre-design (mm-yyyy):		
2. Design (mm-yyyy):		
3. Construction (mm-yyyy):		
5. Construction Duration (in Months):	0	
State Construction Inflation Rate:	3.00%	
Base Month:	Mar-2006	

Project Cost Summary	
Primary MACC (escalated):	\$0
Secondary MACC (escalated):	\$0
Current Project Total:	\$0
Escalated Project Total:	\$0

Includes Formula Overrides:	No
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ITEM	BASE MONTH AMOUNT	FORMULA OVERRIDE	STANDARD FORMULA	ESCALATION FACTOR	ESCALATED COST
A. ACQUISITION COSTS					
1 Purchase/Lease Cost					
2 Appraisal and Closing Costs					
3 Right-of-Way Costs					
4 Offsite Mitigation					
5					
INSERT <--Double-Click Here to Insert a Row					
Total: Acquisition Costs	\$0			1.0000	\$0
B. CONSULTANT SERVICES					
1 Pre-Schematic Design Services					
a. Programming/Site Analysis					
b. Environmental Analysis					
c. Predesign Study					
d.					
INSERT <--Double-Click Here to Insert a Row					
SubTotal: Pre-Schematic Design Services	\$0			0.0000	\$0
2 Construction Documents					
a. A/E Basic Design Services - Up to Bidding (69%)	\$0		\$0		
b. A/E Basic Design Services - Secondary (69%)	\$0		\$0		
SubTotal: Construction Documents	\$0			0.0000	\$0
3 Extra Services					
a. Civil Design (Above Basic Services)					
b. Geotechnical Investigation					
c. Commissioning					
d. Site Survey					
e. Testing					
f. Energy Conservation Report					
g. Voice/Data Consultant					
h. VE Participation & Implementation					
i. Constructability Review Participation					
j. Environmental Mitigation Services (EIS)					
k. Landscape Consultant					
l.					
INSERT <--Double-Click Here to Insert a Row					
SubTotal: Extra Services	\$0			0.0000	\$0
4 Other Services					
a. Bid/Construction/Closeout - 31% of basic services	\$0		\$0		
b. Bid/Construction/Closeout - Secondary	\$0		\$0		
c. HVAC Balancing					
d. Commissioning and Training					
e.					
INSERT <--Double-Click Here to Insert a Row					
SubTotal: Other Services	\$0			0.0000	\$0
5 Design Services Contingency	0.00%	\$0	\$0		
a.					
INSERT <--Double-Click Here to Insert a Row					
SubTotal: Design Services Contingency	\$0			0.0000	\$0
Total: Consultant Services	\$0				\$0

C. CONSTRUCTION CONTRACTS				
1 Site Work				
a. G10 - Site Preparation				
b. G20 - Site Improvements				
c. G30 - Site Mechanical Utilities				
d. G40 - Site Electrical Utilities				
e. G60 - Other Site Construction				
f.				
INSERT	<--Double-Click Here to Insert a Row			
SubTotal: Site Work		\$0	0.0000	\$0
2 Related Project Costs				
a. Off site improvements				
b. City Utilities Relocation				
c. Parking Mitigation				
d. Stormwater Retention/Detention				
e. Wetland Mitigation				
f.				
INSERT	<--Double-Click Here to Insert a Row			
SubTotal: Related Project Costs		\$0	0.0000	\$0
3A Facility Construction - Primary				
a. A10 - Foundations				
b. A20 - Basement Construction				
c. B10 - Superstructure				
d. B20 - Exterior Closure				
e. B30 - Roofing				
f. C10 - Interior Construction				
g. C20 - Stairs				
h. C30 - Interior Finishes				
i. D10 - Conveying				
j. D20 - Plumbing Systems				
k. D30 - HVAC Systems				
l. D40 - Fire Protection Systems				
m. D50 - Electrical Systems				
n. F10 - Special Construction				
o. F20 - Selective Demolition				
p. General Conditions				
q.				
INSERT	<--Double-Click Here to Insert a Row			
SubTotal: Facility Construction - Primary		\$0	0.0000	\$0
Maximum Allowable Construction Cost (MACC) - Primary		\$0		\$0
3B Facility Construction -Secondary (By Building System)				
a. A10 - Foundations				
b. A20 - Basement Construction				
c. B10 - Superstructure				
d. B20 - Exterior Closure				
e. B30 - Roofing				
f. C10 - Interior Construction				
g. C20 - Stairs				
h. C30 - Interior Finishes				
i. D10 - Conveying				
j. D20 - Plumbing Systems				
k. D30 - HVAC Systems				
l. D40 - Fire Protection Systems				
m. D50 - Electrical Systems				
n. F10 - Special Construction				
o. F20 - Selective Demolition				
p. General Conditions				
q.				
INSERT	<--Double-Click Here to Insert a Row			
SubTotal: Facility Construction -Secondary (By Building System)		\$0	0.0000	\$0
Maximum Allowable Construction Cost (MACC) - Secondary		\$0		\$0
4 GC/CM Risk Contingency - NOT APPLICABLE				
5 GC/CM or Design Build Costs - NOT APPLICABLE				
6 Construction Contingencies				
a. Management Reserve	0.00%	\$0	\$0	
b. Allowance for Change Orders	0.00%	\$0	\$0	
c.				
INSERT	<--Double-Click Here to Insert a Row			
SubTotal: Construction Contingencies		\$0	0.0000	\$0
7 Sales Tax	0.00%	\$0	\$0	
a.				
INSERT	<--Double-Click Here to Insert a Row			
SubTotal: Sales Tax		\$0	0.0000	\$0
Total: Construction Contracts		\$0		\$0

D. EQUIPMENT									
1	E10 - Equipment								
2	E20 - Furnishings								
3	F10 - Special Construction								
4									
INSERT		<--Double-Click Here to Insert a Row							
SubTotal: Equipment				\$0			0.0000		\$0
99	Sales Tax	0.00%		\$0		\$0			
100									
INSERT		<--Double-Click Here to Insert a Row							
SubTotal: Sales Tax				\$0			0.0000		\$0
Total: Equipment				\$0					\$0
E. ARTWORK									
1	Project Artwork		N/A			N/A			
2	Higher Education Artwork		N/A			N/A			
3									
INSERT		<--Double-Click Here to Insert a Row							
Total: Artwork				\$0			1.0000		\$0
F. OTHER COSTS									
1	Mitigation Costs								
2	Hazardous Material Remediation/Removal								
3									
INSERT		<--Double-Click Here to Insert a Row							
Total: Other Costs				\$0			0.0000		\$0
G. PROJECT MANAGEMENT									
1	Agency Project Management			\$0		\$0			
2									
INSERT		<--Double-Click Here to Insert a Row							
Total: Project Management				\$0			1.0000		\$0
GRAND TOTAL				\$0					\$0
NOTES									

STATE OF WASHINGTON
BENEFIT AND LIFE CYCLE COST ANALYSIS SUMMARY

FORM
C-3
 (Rev 6-01)

AGENCY: _____	ANALYSIS TYPE: LCC
PROJECT: _____	ANALYSIS DATE: _____
LOCATION: _____	ANALYSIS BY: _____
Economic Life: ____ Yrs Discount Rate: ____	FILE NAME: _____

Description	Alternate No. 1		Alternate No. 2		Alternate No. 3	
	Estimated Cost	Present Worth	Estimated Cost	Present Worth	Estimated Cost	Present Worth
1. Initial Costs						
A. _____	_____	_____	_____	_____	_____	_____
B. _____	_____	_____	_____	_____	_____	_____
C. _____	_____	_____	_____	_____	_____	_____
D. _____	_____	_____	_____	_____	_____	_____
E. _____	_____	_____	_____	_____	_____	_____
F. _____	_____	_____	_____	_____	_____	_____
G. _____	_____	_____	_____	_____	_____	_____
Total Initial Cost (PW)						
Total Initial Cost Savings						
2. Replacement/Salvage Costs						
Year PW						
A. _____	_____	_____	_____	_____	_____	_____
B. _____	_____	_____	_____	_____	_____	_____
C. _____	_____	_____	_____	_____	_____	_____
D. _____	_____	_____	_____	_____	_____	_____
E. _____	_____	_____	_____	_____	_____	_____
F. _____	_____	_____	_____	_____	_____	_____
G. _____	_____	_____	_____	_____	_____	_____
H. _____	_____	_____	_____	_____	_____	_____
Total Replacement/Savings (PW)						
3. Annual Costs						
Dif. PWA						
Escal						
A. _____	_____	_____	_____	_____	_____	_____
B. _____	_____	_____	_____	_____	_____	_____
C. _____	_____	_____	_____	_____	_____	_____
D. _____	_____	_____	_____	_____	_____	_____
E. _____	_____	_____	_____	_____	_____	_____
F. _____	_____	_____	_____	_____	_____	_____
G. _____	_____	_____	_____	_____	_____	_____
H. _____	_____	_____	_____	_____	_____	_____
Total Annual Cost						
Total Annual Cost (PW)						
Grand Total PW Costs						
Life Cycle PW Savings						
Savings %						